

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

107522195

1 Date of Request: _____		2 Serial/Patent # _____	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
	Filing		\$
	Amendment		\$
	Extension of Time		\$
	Notice of Appeal/Appeal		\$
	Petition		\$
	Issue		\$
	Cert of Correction/Terminal Disc.		\$
	Maintenance		\$
	Assignment		\$
	Other		\$
		7 TOTAL AMOUNT OF REFUND	
		\$	
		8 TO BE REFUNDED BY:	
		Credit to Treasury Check \$500.00 Credit Deposit A/C #: 9 -- 	
10 REASON:			
	Overpayment		
	Duplicate Payment		
	No Fee Due (Explanation):		
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: _____		TITLE: _____	
SIGNATURE: _____		PHONE: _____	
OFFICE: _____			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: _____		DATE: _____	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B